

New
 Revised (i.e. New Bank Account)

AUTHORIZATION AGREEMENT FOR AUTOMATED PAYMENTS

COMPANY NAME Austin Heights HOA

I (we) hereby authorize Austin Heights HOA c/o Diversified Property Management, hereinafter called COMPANY, to initiate a debit entry to my (our) Checking _____ Savings _____ account (select one) indicated below and the depository named below, hereinafter called DEPOSITORY, to credit same to such account.

DEPOSITORY

NAME: _____

BRANCH: _____

CITY: _____ STATE: _____ ZIP: _____

ROUTING/ABA* NO. _____ ACCOUNT# _____

*Check with your financial institution regarding their ACH routing number which CAN differ from the routing number on your check.

This authority is to remain in full force and effect until COMPANY and DEPOSITORY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

NAME: _____

SIGNED: _____

NAME: _____

SIGNED: _____

DATE: _____

PROPERTY

ADDRESS: _____

(ATTACH A COPY OF A VOIDED CHECK TO THIS FORM)
PAYMENT OPTIONS

Annually: January 5th
 Quarterly: Jan 5th, April 5th, July 5th, and Oct 5th

Mail Form To: Austin Heights HOA c/o Diversified Property Mgmt
P.O. Box 62218
Colorado Springs, CO 80962-2218